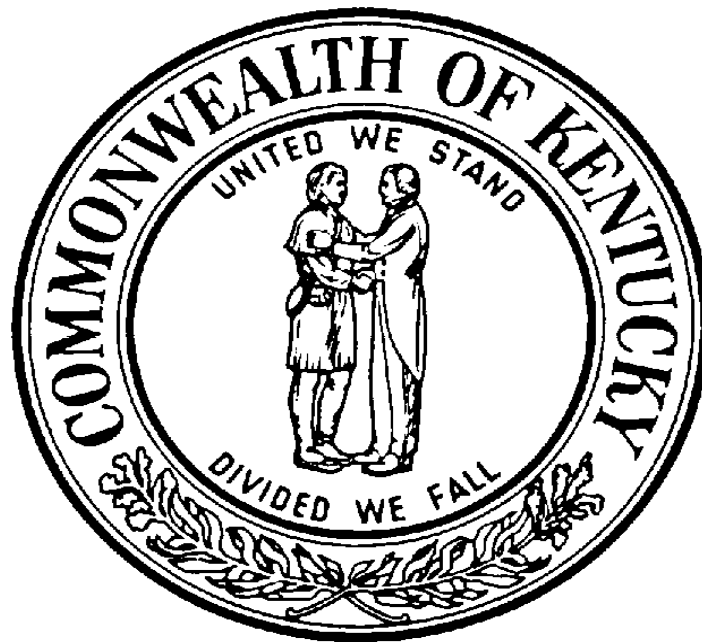


Kentucky

Department for Public Health

FY 2003

Annual Report



Ernie Fletcher, Governor
Rice C. Leach, M.D. Commissioner

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COMMONWEALTH OF KENTUCKY

Department for Public Health
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INTRODUCTION

"We are in business to help Kentuckians be well."

Department Overview

The Department for Public Health (DPH) is the only agency in Kentucky responsible for developing and operating all public health programs for the people of the Commonwealth. Kentucky Revised Statute 194.030 created DPH to "develop and operate all programs of the cabinet that provide health services and all programs for the prevention, detection, care, and treatment of physical disability, illness, and disease."

In Fiscal Year 2003, DPH expended a total of **\$ 235,194,011** with **52.4% percent** of these expenditures from federal dollars. Total expenditures for Kentucky's state and local health departments were approximately **\$355 million**, which comes from state and federal funds, local taxes, local agency funds, and fees for services. One of three departments in the Cabinet for Health Services, DPH has a staff of 393 at the state level divided among six divisions described below:

1. The **Division of Adult and Child Health (ACH)** promotes maternal and child health by developing systems of care and by providing health and nutrition services to women, infants and children. ACH also includes programs for all Kentuckians through chronic disease control, health care access and drug enforcement.
2. The **Division of Epidemiology and Health Planning** is responsible for communicable disease prevention and control, disease surveillance and investigation, injury prevention and research, maintenance of Vital Statistics, and health data, including hospital data and county health profiles.
3. The **Division of Laboratory Services** provides analysis and quality control for health department laboratories and reference services to laboratories. The central lab also conducts metabolic screening for all newborns in the state.
4. The **Division of Local Health Department Operations** provides administrative support local health departments in all 120 counties of the Commonwealth. New to this Division is the Public Health Nursing Branch, which provides technical support to public health nurses.
5. The **Division of Public Health Protection and Safety** protects Kentuckians from unsafe consumer products, radiation and other toxic exposure, unsanitary milk, adulterated and misbranded food, unsanitary public facilities, and malfunctioning sewage systems.
6. The **Division of Resource Management** develops and oversees the Department for Public Health's budget as well as local health departments' fiscal planning, allocations and payments, and their administrative and management practices. The Division also manages departmental procurement/contracts and information technology programs.

The emphasis on bioterrorism (BT) and weapons of mass destruction (WMD) that pushed public health to the forefront during FY 2002 continued in FY 2003. The Department for Public Health received nearly \$15 million from agencies of the United States Department for Health and Human Services to plan for hospital and public health responses to BT and WMD. The department enlisted the assistance of over fifty agencies across the state to develop comprehensive plans to address preparedness, epidemiology, laboratory services, chemical responses, data systems, appropriate risk communication to the general public, and training for a large number of health workers in many disciplines.

Extensive physical modifications to the state public health laboratory have begun, modifications that make the facility much more secure and make it much easier to respond to a surge in demand for laboratory work to detect and identify biologic and chemical agents that could be used in attacks. The department hired some additional staff and has requests to hire other staff authorized under the grant. The department purchased some equipment and has requisitions for significant increases in information technology processing equipment and services are ready for approval during the current federal fiscal funding cycle. The department has requested the CDC to approve the Breathitt Veterinary Laboratory in Hopkinsville and the Jefferson County Health Department Laboratory in Louisville as additional bioterrorism approved testing facilities to enable more rapid processing of suspected materials and to increase our surge capacity.

The Kentucky Hospital Association has been the lead contractor to get the state's acute care hospitals involved in local and regional planning. The preliminary results have been encouraging. Across the state hospitals, health departments, and others have participated in drills to test the plans and the responses to tornado and flood emergencies suggest that this planning is generating the anticipated increased efficiency and lessened bureaucracy.

In the area of more traditional public health matters, the evaluation of the HANDS program for at risk prenatal mothers has demonstrated significant reductions in child neglect, child abuse, and very low birth weight in the families participating in the program. This is very important because these positive outcomes are necessary precursors for later positive outcomes like improved school performance, reduced youth behavioral problems, and in the long run, improved ability to take part in the economy. Additional local public health departments brought their HANDS programs on line and continued to provide the mandated and optional public health services during a time of continued pressure on state and local revenues.

Rice C. Leach, MD
Commissioner

PROGRAM ACHIEVEMENTS

Commissioner's Office

The Commissioner's Office is responsible for the general management, oversight, and establishment of policy for the Department for Public Health (DPH). It advises the heads of agencies in state government on issues relating to public health, including actions necessary to safeguard the health of the citizens of the Commonwealth. The Commissioner serves as Chief Medical Officer of the Commonwealth. Additional roles of the Commissioner's Office include health care reform, strategic planning and enhancement of local health departments.

The office coordinates legislation and regulations among the six Divisions and between the Department and other agencies of state government. This involves reviewing pending legislation for Departmental impact, responding to requests from the General Assembly, coordinating presentations before committees, and maintaining communication on legislative issues. Staff also coordinate the Department's activities in promulgating regulations and making appointments to various boards and councils.

The Commissioner's Office staff provides the Department's Divisions with expertise in the legislative process, such as proposed bill review and administrative regulation development and interpretation.

The Director of Nursing provides professional consultation to the DPH Commissioner, Executive Staff, state and local health department administrators, and approximately **1,100** nurses practicing in local health departments. She directs the operation of nurse-managed employee health centers in for state employees and she is also the Department's Principal Nurse Consultant to the Cabinet, universities, and community-at-large.

Division of Adult and Child Health

The **Division of Adult and Child Health** is responsible for identifying risks to good health and for developing methods to reduce those risks through population and personal preventive services. Staff set standards to focus more on outcomes than on processes. This outcome-based approach also gives local health departments increased flexibility.

Maternal and Child Health Branch

Kentucky experienced its lowest recorded infant mortality rate ever (5.9%) which was also less than the 6.9% U.S. rate. A community's infant mortality rate is an indicator of the overall health status of the community. The Maternal and Child Health Branch (MCH) implements education and clinical services in family planning and maternity care. Metabolic newborn screening and genetic and diagnostic services are administered by the Branch as well as child preventive health screenings, child lead poisoning prevention and early childhood initiatives. The KIDS NOW, early childhood initiatives includes home visiting through the HANDS program, folic acid supplementation/counseling, Healthy Start in Child Care, which promotes child nutrition, safety and socio-emotional wellbeing and the Mental Health Program. The KY Birth Surveillance Registry provides critical data and information re: Kentucky children born with birth defects and MCH administers Child Fatality Review and injury prevention programs. Abstinence and teen pregnancy prevention programs are promoted by MCH and as of FY 2004, coordinated school health initiatives are now under the auspices of MCH.

Family Planning is provided to individuals including information about the means to choose the number and spacing of children. The Family Planning and Population Research Act of 1970 (Title X) authorizes grants for contraceptive methods and infertility services. The funds earmarked for family planning provide comprehensive medical, social, and abstinence counseling services through **154** clinic sites in all **120** counties. Family planning provided services to **114,458** individuals in FY 03.

The Branch oversees maternity services in health departments with the goal of reducing maternal and infant mortality and decreasing the need for high cost neonatal intensive care. Prenatal service which includes health screening and counseling prior to conception, outreach and follow-up, nursing and nutrition counseling, preterm birth prevention screening and education, routine laboratory tests, routine radiology exams, delivery, post partum care, and home visits are available to low income women. Maternity services were provided to **8,659 uninsured** women in FY 03.

The Branch oversees the evaluation and treatment of children with inborn errors of metabolism identified by newborn screening, as well as follow-up treatment for infants born with sickle cell disease. Referrals to university diagnostic centers were made for

409 infants with positive or inconclusive results for phenylketonuria (PKU), galactosemia, congenital hypothyroidism and sickle cell disease. Special formula for PKU was provided free to **77** low-income patients.

The Branch oversees child health services provided by local health departments. These services promote the health of infants, children, and adolescents. They reduce the incidence of preventable disease, injuries, and disabling conditions. Preventive services include health history and physical examinations, laboratory tests, immunizations, and health education. Children's preventive services were provided to **225,870** children.

Lead screening was provided to **30,131** children during CY 2003. During this same time period, there were 129 open cases of elevated blood lead levels (equal to or greater than 20 ug/dL). Training in lead poisoning prevention management was provided to 19 public health professionals from across the nation in October, 2003.

HANDS (Health Access and Nurturing Development Services) provided home visiting services for first-time mothers to **8,789** families in FY03. This is a home visitation to overburdened families to assist them in meeting the challenges of parenting during the prenatal period and continuing during the children's first two years of life. The program is now provided in **120** counties.

Folic Acid supplementation is provided to all women of childbearing age along with education regarding the prevention of neural tube defects. **85,736** women received folic acid supplementation and counseling in FY 03.

The Branch provides technical assistance and education to childcare providers across the state in order to promote a healthy environment for young children in out-of-home settings. The education addresses health, safety, nutrition and social/emotional needs. Healthy Start Consultants are available through local health departments and have made **11,875** consultations to childcare providers and conducted **3,239** classes. Following the Surgeon General's call stating that our public health system must respond as readily to the needs of children's mental health, the consultants have included a behavioral assessment tool entitled the Devereux Early Childhood Assessment (DECA) in their services. Parents and/or teachers can use this tool to help build resiliency in children. The Healthy Start consultants have provided approximately 100 DECA interventions.

The Branch offers an Early Childhood Mental Health Program in cooperation with the Department for Mental Health and Mental Retardation. Fourteen (14) Early Childhood Mental Health Specialists are employed in mental health agencies across the state to provide direct therapeutic and assessment services to children birth to five in early care and education settings. Over **5600** services have been provided to children in Kentucky in FY 03. 800+ children have entered the program for mental health services since its inception.

The Branch identifies children with birth defects and disabling conditions through the Kentucky Birth Surveillance Registry (KBSR). This service is coordinated with Genetic Services and the KEIS, First Steps program, to offer services to children at risk who have developmental challenges. KBSR also provides educational trainings regarding birth defects and genetic conditions, and promotes prevention activities related to birth defects.

Through the child fatality review program, grief counseling is offered to any family whose child under 18 years of age has died. Grief counseling was provided to **59** families in FY 03. Grief counseling contacts with a family offer the opportunity to evaluate the possibility of personal, medical, financial and other needs to be met for the family during their time or bereavement. The Maternal and Child Health Branch also publishes an annual Child Fatality Review providing statistics and suggested interventions for the prevention of future fatalities.

The Branch offers abstinence education to school age teens through collaborative between local health departments and community agencies. Abstinence education service and education have been provided to over **25,000** adolescents.

Chronic Disease Prevention and Control Branch

The Chronic Disease Prevention and Control Branch is responsible for decreasing the morbidity and mortality from chronic diseases. Emphasis is on prevention and risk factors that can be reduced through healthy lifestyles. The Branch puts a significant amount of its effort into decreasing the use of tobacco, increasing physical activity, and improving the eating habits of Kentuckians. The use of preventive screening tests such as Pap tests and mammograms is also promoted through the Branch's efforts. The Branch's programs include asthma, arthritis, cardiovascular health, diabetes, breast and cervical cancer screening, tobacco, home health and health promotion.. The Branch provides funding to local health departments for community-based services aimed at individuals and at bringing about policy and environmental changes that will improve the health status of Kentuckians. Achievements of the Branch's six major programs follow.

The Kentucky Women's Cancer Screening project provides breast and cervical cancer screening and diagnostic follow-up services to low-income women. Local health departments provided **17,441** screening and **3,459** diagnostic mammograms for FY 2002. Local health departments provided a total of **97,359** Pap tests. Local health departments provide cancer risk counseling, clinical breast exams, Pap tests, and pelvic exams. Forty-six (46) community breast and cervical cancer coalitions were funded across the state to reach low-income women with screening.

The Tobacco Use Prevention and Cessation Program expanded its capacity in 2002 to reduce preventable deaths and disease in Kentucky through prevention education and

cessation assistance. Master Settlement Agreement funding became available which allowed the program this expansion from the original 11 local health departments to all **55** local health departments covering all **120** counties. The Program continues to focus on the four CDC goals, youth use prevention, cessation assistance for adults and youth who want to become nonsmoker, eliminating nonsmokers exposure to second hand smoke, and identifying and eliminating disparities among population groups disproportionately effected by tobacco use. Local and state efforts include development of local coalitions to assist with plan development and implementation of strategies including community, school, cessation intervention, media coverage, and surveillance and evaluation programs. At least one adult cessation assistance program is now available in **96%** of the local service area. Efforts are continuing to introduce these programs across the state. New partners, the Kentucky Carpenter's Union and at least one major insurance company, have come forward to assist by providing related health benefit coverage (nicotine replacement therapy) for their members participating in these programs. All local health departments have received training targeting pregnant smokers and mothers of young children, one of the most profoundly effected special populations in Kentucky. The second Kentucky Youth Tobacco Survey was completed and results will be disseminated. Over **95%** of the public health services areas have school systems that are cooperating in providing youth education and cessation education for teens. State efforts have also focused on increasing awareness of the health risks associated with tobacco use and engaging new partners to assist in the mission of the program. Current partners include Kentucky Cancer Program, American Heart Association, American Lung Association, American Cancer Society, state universities, Campaign for Tobacco Free Youth, and many others. The KMA gave their endorsement to the program through a formal resolution. Governmental partners include the Office of Attorney General, the CFC, KDE, MHMR, and the Office on Women's Mental and Physical Health. The Program received a \$25,000 competitive grant to address teen smoking.

The Cardiovascular Health (CVH) Program has retained capacity level funding through a cooperative agreement with the Centers for Disease Control and Prevention. The current grant at \$415,000 supports program activities to prevent heart disease and stroke through primary and secondary prevention methods.

Get With The Guidelines-Coronary Artery Disease is one such program.

Developed by the American Heart Association, in conjunction with the American College of Cardiology, the guidelines serve to reduce the secondary incidences of coronary artery disease in current patients by improving inpatient hospital care and follow-up. The **Patient Management Tool** developed to help the hospitals improve patient outcomes is a web-based tool that provides the prompts and information used to help the hospital staff adhere to the guidelines, and aides them in patient counseling and education on select indicators. Twenty-six hospitals initially implemented the **PMT**, with 19 of them becoming GWTG-CAD recognized hospitals. This initiative is to continue through FY 04 and 05.

The CVH Program also continues to support the Louisville Metro Health Department initiative to reduce the burden of heart disease and stroke in the African-American population in Metro Jefferson County. Population-based strategies are being implemented in the community through the neighborhood places and also faith-based centers.

The CVH Program continues to be an integral part of the Kentucky Cardiovascular Health Coalition. The Coalition has been effective in carrying-out activities aimed at reaching the Coalition's objectives of reducing the incidences of heart disease in Kentucky. The Coalition is in the process of putting more emphasis on stroke by focusing on high blood pressure and high cholesterol.

The Program is staffed by one program coordinator and two health policy specialists, with one health policy specialist splitting his time with the Kentucky Diabetes Prevention and Control Program.

The Diabetes Control and Prevention Program (DCPP) seeks to decrease the impact of diabetes among Kentuckians primarily by means of population-based approaches. This effort targets individuals with and at risk for diabetes and is supported with both State and Federal (CDC) funds. The Federal funds are directed at improving five federally defined performance measures related to individuals with diabetes. **All five performance measures (A1C testing, flu and pneumococcal immunization, foot and eye exams) have shown significant improvement over the current grant cycle including some reduction in the documented disparities for the African American, Appalachian and senior populations.** The state-funded portion of the program underwent a re-design last year. A committee of public and private partners met and made recommendations for the design of a new program which most efficiently utilizes the funds in an ongoing, coordinated effort which augments and compliments the Federal efforts. Special attention was given to collaboration with other programs and organizations that promote physical activity and healthy nutrition in persons who do not yet have diabetes. Implementation began this fiscal year. The Kentucky Department for Public Health, in conjunction with a committee of individuals representing state and local public health agencies, and other public and private partners, developed recommendations regarding the design of a new and up-to-date Diabetes Prevention and Control Program. The recommendations were implemented July 1, of the current fiscal year. Recognizing that existing funds were not sufficient to support implementation of all aspects of the program statewide, this design has been implemented at the following three levels of activity:

- **Level 1** – Public Awareness* (*LHDs covering all 120 counties*)
- **Level 2** – Public Awareness* plus Community Education* (*LDHs covering 58 counties*)

- **Level 3** – Public Awareness*, Community Education*, plus Professional Education/Quality Improvement*, Community Coordination*, and certain state-level activities (*LHDs covering 29 counties*)

The Program collaborates with a wide variety of public and private partners to implement various community interventions as well as facilitate system and community changes at the state and local level. Although activities are directed statewide, high-risk populations such as African-Americans, seniors, and those in the Appalachian area are targeted. Fifteen community-based diabetes coalitions and all 120 local health departments were given funds to help implement strategies at the local level. Additionally, the **Kentucky Diabetes Network (KDN)**, a broad-based network whose mission is to improve the treatment and outcomes for Kentuckians with diabetes, to promote early diagnosis, and ultimately, to prevent the onset of the disease, has continued to thrive with now more than **160 organizations, associations, and individuals** working together to impact diabetes-related issues across the state. As a result, the network **generated resources** valued at more than **\$358, 535** for their population-focused efforts. Overall, DCPD efforts have resulted in **numerous related policy, environmental, program and professional practice changes** within various communities and health systems. For example, one local diabetes coalition established a community-walking trail. The National Diabetes Education Program (NDEP) has been implemented statewide resulting in over **22 million exposures** to the NDEP messages and materials via print media and materials, billboards, TV, radio and presentations. A statewide partnership effort with Cooperative Extension was launched in May, 2001, with interventions being implemented through Extension Services in 90% of Kentucky counties. DCPD also worked with Lt. Governor Steve Henry, MD, to establish a task force for Type 2 Diabetes in Youth. In addition, **eighty-four** professional education **programs** were provided to **2,332 health professionals**. **Group diabetes self-management education** was provided to **4,074 individuals** with diabetes and their families during the year. More general diabetes **control or prevention awareness** programs were provided to **16,906** persons. In addition, **126** persons attended specific **nutrition** or **physical activity**-related programs. Although the main focus of the program is on population-based efforts, individual **clinical services** were provided to **8,734** persons with diabetes.

The Branch administers the Preventive Health and Health Services Block Grant from the CDC with most funds going to local health departments to promote and facilitate physical activity within their communities. Every local health department in the state receives Preventive Health and Health Services Block Grant funds to implement these activities. During the first half of state fiscal year 2004, local health departments provided 904 activities to 59,188 participants addressing child and adolescent physical activity and 221 activities to 2,400 participants addressing worksite physical activity. These activities vary between social support interventions in community settings, individually adapted health behavior change programs, community-wide campaigns, “point of decision” prompts, school-based physical education, transportation policy and

infrastructure changes to promote non-motorized transit, creation of or enhanced access to places for physical activity, and urban planning approaches.

The Asthma Program is a new program in the Branch and is currently seeking funding from the Centers for Disease Control and Prevention. The grant would provide funding to build capacity in the Department for Public Health and develop a statewide strategy to address the asthma burden in Kentucky. The Asthma Program is one of the main partners in the statewide Kentucky Asthma Partnership, which was originally established by the American Lung Association of Kentucky, the University of Kentucky, the University of Louisville, and the Kentucky Department for Public Health. The KAP includes members from healthcare systems, clinicians, local health departments, local asthma coalitions, other state agencies (Medicaid program, Department for Education, Department of Environmental Health), Kentucky School Nurses Association, and citizens' advocacy groups. The partnership is currently comprised of more than 80 members representing over 40 agencies, organizations, and practices. The main goal of the KAP is to coordinate asthma activities across Kentucky and provide leadership for a comprehensive approach to asthma. Efforts of KAP members to address the asthma burden in Kentucky includes the successful enactment of a state resolution that allows students to self-administer asthma medications at school with written authorization by the parent and healthcare provider. Another important outcome of these summits was the production of an asthma burden document, *Asthma in Kentucky: Laying the Foundation for a Statewide Strategy*.

The Kentucky Arthritis Program seeks to increase public awareness of arthritis, the importance of early diagnosis, its impact, appropriate management and effective prevention strategies; create, enhance and promote communication and education opportunities to increase arthritis awareness to the public in Kentucky. The Arthritis Program receives \$138,000 from CDC. Currently, 13 health departments receive funds from the grant. Each local health department submits a one-year plan based on the CDC recommended strategies relating to arthritis. The three current recommended strategies are People with Arthritis Can Exercise (PACE), Arthritis Foundation's Aquatics Program, Arthritis Self Help Course (ASHC), and "Physical Activity. The Arthritis Pain Reliever." media campaign. This Program collaborates with a wide variety of public and private partners to help meet these objectives.

The Home Health Program assists in the assurance that home services provided by the 15 Local Health Departments licensed to provide home care are administered by licensed and trained individuals with quality of care as a primary focus. The agencies operate under strict State and Federal regulations and participate in Federal Medicare/Medicaid programs by meeting or exceeding guidelines set forth in Medicare's Conditions of Participation. The 15 health department-based agencies provided 409,809 home visits to 9,053 unduplicated patients.

These agencies also administer the Home and Community-Based Waiver Program, providing assessment, case management, personal care, homemaker and respite services to those individuals who are most at risk of nursing facility placement if community-based services were not available. The 15 health- department based agencies provided 496,096 units of service to 2,896 clients.

Nutrition Services Branch

The **Nutrition Services Branch** administers the Special Supplemental Nutrition Program for Women, Infants, and Children (**WIC**), the Adult and Child Health (ACH) Nutrition Program (Cost Center 805), the 5 A Day Program, the Centers for Disease Control Obesity Prevention Grant and partners with the Department of Agriculture for the Farmers' Market Nutrition Program.

WIC is a federally funded program that sets standards for nutrition services. **WIC's** primary focus is to provide nutritious foods, nutrition education and, when appropriate, breastfeeding information and referral for intensive care to low-income pregnant, breastfeeding and postpartum women, infants, and children who are at nutritional risk. The Program is also responsible for promoting breastfeeding, which has resulted in **31 percent** of low-income women breastfeeding.

WIC provided approximately **\$64 million** in food instruments in federal fiscal year 2003. WIC serves a monthly average of:

29,380	infants
14,320	pregnant women
2,741	breastfeeding women
9,930	postpartum women
57,171	children under the age of five

The **Food Delivery/Data Section** distributes **WIC** food instruments and data reports for USDA reporting. The section processed and distributed more than **four million** food instruments. The section provides assistance to local WIC sites via telephone and electronic communication as well as by on-site training.

The **Clinical Nutrition Section** helps **WIC** participants improve their nutrition knowledge, food selections and eating choices through both the **WIC** Program and the ACH Nutrition Program. The section provides sound nutrition information to health professionals and **WIC** participants as well as breastfeeding promotion activities and training for hospitals, physicians, and nurses.

The **ACH Nutrition Program** (Cost Center 805) provides medical nutrition therapy to eligible clients of all ages in **113** of 120 counties. The dietitians or certified nutritionists provided medical nutrition therapy services to approximately **20,000** patients in health

departments. Besides providing diet therapy to patients, nutritionists conduct in-service education for staff. The nutritionists provide community programs such as Choose 1% or Less, 5 A Day, weight loss classes for all ages, cooking classes, nutrition and physical activity classes for schools, programs at senior citizen centers, and menus for day care centers, schools and jails.

The **Choose 1% or Less** Campaign is a collaboration of representatives from public and private partnerships. The focus is to encourage consumption of low fat or fat free dairy products and to increase calcium consumption in all Kentucky citizens age two years and older. Over **7,500** individuals have been contacted in a variety of forums such as the State Fair, state basketball tournaments, grocery stores and schools.

The Nutrition Services Branch, in collaboration with the Department of Agriculture, administers the **WIC Farmers' Market Nutrition Program (FMNP)**. FMNP provides participants in the **WIC** Program with coupons to purchase fresh fruits and vegetables at local farmers' markets. Through this program, **WIC** participants receive the nutritional benefits of fresh fruits and vegetables and nutrition education concerning 5 A Day. **41** local agencies/sites, approximately **23,313 WIC** participants and approximately **600** farmers received the benefits of this Program.

The Program Management Section promotes efficient operation of the **WIC** Program. The Section provides review and assistance to local **WIC** sites through on-site visits. Staff made **474** site visits in fiscal year 2003.

The **Vendor Management Section** approves applications, monitors vendors, and provides technical assistance and training to grocers and drug stores. The Section also reviews cleared food instruments for determination of improper redemption of WIC food instruments and initiates appropriate action. On-site monitoring was conducted for half of the **1,227** participating vendors. Contracted vendors are referred to the Office of Inspector General for undercover investigations. Appropriate action is taken by the Program based upon the results of the investigations.

The **CDC Obesity Grant Section** is in its first year of capacity building. The funding for 2003-2004 is **\$413,000**. One of the goals of the first year is to hire three full time positions: a program director, a physical activity coordinator and a nutrition coordinator. The second goal for the first year is to write a comprehensive state plan that will address the six areas of the grant: increase physical activity, increase fruit and vegetable consumption, increase breastfeeding, increase parental involvement, decrease computer and television screen time, and other dietary changes. To accomplish this goal, a leadership team of public and private partners has been formed and is in the process of developing regional meetings to garner broad state input for the plan. The state plan will be completed by December, 2004.

Drug Enforcement and Professional Practices Branch

The Drug Enforcement and Professional Practices Branch administers and enforces the Kentucky Controlled Substances Act, the drug and device portions of the Kentucky Food, Drug and Cosmetic Act, the use of the title "Doctor" or "Dr.," and the Treatment of Cancer Law. In addition, the program provides technical and professional expertise to licensing boards, local health departments, and law enforcement agencies that enforce controlled substances laws.

Beginning in 1999, the Kentucky All Schedule Electronic Reporting (KASPER) controlled substance prescription monitoring program was added to the Drug Enforcement and Professional Practices Branch's responsibilities. This program allows physicians, pharmacists, law enforcement personnel, professional licensure boards, grand jury subpoenas and courts to receive reports on individuals in the Commonwealth. The purpose of this program is to diminish the incidence of controlled substance diversion.

Drug Enforcement also supplements the efforts of other agencies. The administration and enforcement of the Kentucky Controlled Substances Act directly affects **12,000 to 15,000** persons who are permitted by law to manufacture, prescribe, administer, dispense, possess, or conduct research with controlled substances. The Drug Enforcement Program licenses manufacturers, distributors and re-packers of controlled substances. The staff works with the federal Drug Enforcement Administration, the Kentucky State Police, as well as local police departments and sheriffs to prevent legal controlled substances from being diverted to illegal channels. Persons who legally possess controlled substances are monitored and inspected for compliance regarding security, record keeping, and labeling. Violators are penalized either by the licensing process or by the criminal justice system. The program also updates the list of controlled substances via administrative regulation

Activities of the Branch include:

110,769 KASPER reports

1,050 investigations for potential violations

227 licensing of manufacturers and wholesalers of controlled substances

2,100 consultations with individuals about the drug laws

Health Care Access Branch

FY 2002 saw the creation of the Health Care Access Branch consisting of the primary care and oral health programs that were formerly part of the Maternal and Child Health Branch. This new Branch was established to give focus and emphasis to activities conducted by the Division of Adult and Child Health that address issues of accessibility and availability of essential primary medical and oral health services at the community level.

The Primary Care Program has a cooperative agreement with the federal Department of Health and Human Services (DHHS) to provide current data on health professionals in Kentucky that is used by the Secretary of DHHS in designating Health Professional Shortage Areas (HPSAs) and Medically Underserved Areas (MUAs) in Kentucky. Branch staff obtains licensure data from the Kentucky Board of Medical Licensure and conduct surveys of local physicians to determine the number of primary care physicians actually practicing in Kentucky counties and the degree to which these physician practices serve the uninsured and underinsured populations.

Following the identification and designation of HPSAs and MUAs, staff of the primary care program participate in several programs aimed at increasing the number of health professionals available to serve these areas:

Conrad State 30 program. This program permits each state to recommend up to 30 applications from foreign-born physicians who have received advanced medical training in the U.S. to remain in the U.S. after their training to serve underserved areas. In FY 2003, the Health Care Access Branch received 36 applications and recommended 30 to the U.S. State Department for approval.

Appalachian Regional Commission (ARC) J-1 Visa Waiver program. Similar to the Conrad State 30 program, in FY 2003 staff of the Health Care Access Branch received, reviewed, and recommended 24 applications to the ARC for foreign medical graduate primary care physicians and psychiatrists seeking to practice in underserved Appalachian communities.

National Health Service Corps (NHSC). The NHSC provides a resource for the recruitment and placement of health professionals in qualified HPSAs. During FY 2003, staff of the Health Care Access Branch received and reviewed 35 NHSC applications requesting 13 family physicians, 3 pediatricians, 4 internal medicine specialists, 3 obstetricians, 9 psychiatrists, 10 psychologists, 2 dentists, 5 family nurse practitioners, 4 certified nurse midwives, 2 psychiatric nurse practitioners, 4 clinical social workers, 4 physicians assistant, and 13 mental health therapists or counselors.

The Division of Adult and Child Health is a partner with Health Kentucky, a nationally recognized public/private program that seeks to provide health and medical services to Kentuckians with incomes below the federal poverty level who are not eligible for Medicaid and have no other health insurance coverage. Staff of the Health Care Access Branch answer the Kentucky Physicians Care (KPC) hotline to provide information about the program and make referral to volunteer physicians, pharmacists, and other participating health care providers. During FY 2003, staff of the Health Care Access Branch received 20,202 client enrollment applications for 34,169 active clients and handled 13,181 calls to the KPC hotline. While no data is available to document the number of physician visits provided through the program, 69,164 prescriptions were dispensed to KPC enrollees with an average wholesale value of \$6,050,943.

The Oral Health Program has attempted to make medical professionals as well as non-professionals aware of the linkages of oral health with general health (i.e., diabetes, heart disease, pre-term low birth weight babies, early childhood caries, and others) through disease prevention and health promotion activities. Their vision is that oral health is integral to general health; most oral diseases are highly preventable using evidence-based approaches.

Notable achievements of the Kentucky Department for Public Health Oral Health Program for FY 03 include:

- In FY 2003, fluoridated community water systems served approximately 99% of the population of the Commonwealth or over 4 million citizens. Kentucky is second only to Minnesota in the level of community water fluoridated.
- There were 219 communities and 21 rural schools that participated in the Community Fluoridation Program in FY 2003.
- Fluoride supplements (tablets or drops) were provided to 1000 children who do not have a fluoridated home water supply
- Approximately 1000 Kentucky family water supply samples were tested for fluoride content by the State Laboratory and reported to the Oral Health Program for supplement dispersal
- Kentucky began testing the KIDS SMILE fluoride varnish program at several pilot sites in January of '03, with rollout of the program statewide targeted for FY04. KIDS SMILES uses local health department nurses to apply fluoride varnish to children ages 0 through five.
- Dental health education was provided to approximately 26,000 children in grades kindergarten to sixth grade through local health departments with Oral Health Program input
- Spit tobacco prevention and promotion presentations were provided to approximately 2730 individuals at 19 events as part of the Spit Tobacco Prevention Program. Oral cancer kits were provided.
- Oral health counseling, educational and health promotion materials, and information were provided to approximately 3600 adults and 1100 children at 20 events (health fairs, state fair, and similar occurrences) in various locales throughout the Commonwealth
- In support of the dental public health activities in the state, partners at the University of Kentucky College of Dentistry provided the following under contract:
 - Children served by the UK mobile dental outreach and educational programs increased by 52% over the previous year (6,348 to 9,675).
 - Publication of the 2001 Children's Oral Health Survey
 - Implementation of the Kentucky Quit Spit Program, including the development of a modular education resource box and oral cancer self-screening kit.

- Assistance with the rollout of KIDs Smile; training local health department personnel to provide oral health screenings, to apply fluoride varnish and dental case management
- Design and implementation of the Kentucky Elder Oral Health Survey
- Conduct of Physician Oral Health Education in Kentucky (POHEK), providing special oral health training to faculty and residents in regional locations throughout Kentucky.

The Children's Oral Health Survey data will form the bases for a surveillance system using sentinel schools and classrooms from across the Commonwealth. In addition, the final design and pilot testing of a protocol for the KY Elder Oral Health Survey was completed using leveraged resources from a variety of sources in the Commonwealth.

- The Kentucky Adult Oral Health Survey was conducted by the University of Louisville School of Dentistry. The survey was conducted through a telephone survey of 2,066 adults and included questions with regard to utilization of dental services, self-reported oral health status and knowledge/beliefs regarding the causes for oral cancer. Data has been compiled and is available through the Oral Health Program office.
- The Pikeville College School of Osteopathic Medicine, under contract with the Kentucky Department for Public Health, provided educational experiences in oral health to medical students, intern and resident physicians.
- The Oral Health Program was successful in providing information, support and educational experiences related to several legislative proposals that, in the future, will facilitate the mission of the Program and the Department.

Division of Epidemiology and Health Planning

The **Division of Epidemiology and Health Planning** provides the following services:

- Assessment of the occurrence of and risk factors for preventable diseases and injuries in the Commonwealth
- Policy development related to the prevention of disease and injury
- Assurance of public health services, primarily through local health departments
- Coordination of public health preparedness activities including bioterrorism response

Responsibilities of the Division include: control of communicable disease, disease surveillance and investigation, injury prevention and research, vital statistics, health data, and bioterrorism preparedness. The Division carries out these core public health functions through the activities of its six Branches.

The Division's State Epidemiologist, Division Epidemiologist, and State Public Health Veterinarian consult with health professionals, individuals, and the media regarding infectious diseases, risk factors for disease, and other public health topics. One of the main responsibilities of the State Public Health Veterinarian is analyzing reports of zoonotic disease. In fiscal year 2003, consultations on rabies alone numbered **588**.

The State Injury Prevention Program is within the Division. It is located in the Kentucky Injury Prevention Research Center (KIPRC) at the University of Kentucky. KIPRC has two major objectives. One is to maintain a state-of-the-art, population-based, public health injury surveillance system. The second objective is to operate a community-based injury prevention program that focuses on the major causes of unintentional injury among Kentuckians and the regions of the Commonwealth where injury problems are most prevalent.

Communicable Disease Branch

The **Communicable Disease Branch** works to control, reduce, and eliminate certain communicable diseases. Local health departments provide direct care and public health services while Branch staff provide epidemiological services and related training, educational materials, technical and financial assistance, and program planning and evaluation. The Branch also consults with the Epidemiology Rapid Response Team that provides support to local health departments in controlling disease outbreaks. The three major programs in the Branch are described as follows.

The Immunization Program provides private and public health facilities with vaccines against diphtheria, tetanus, pertussis (whooping cough), poliomyelitis, measles, rubella, mumps, hepatitis B, varicella (chicken pox), *Haemophilis influenzae* type b, and hepatitis A, influenza, and pneumonia for certain high risk children. The Program oversees vaccine procurement, conducts disease surveillance and control, assesses the target populations, and informs providers about vaccine-preventable diseases and vaccinations.

This past year, the Program distributed vaccine to public and private providers, resulting in the administration of **660,237** doses of vaccine to Kentuckians. Local health departments administered **444,346** doses of vaccine, primarily to children from birth to five years of age and to beginning sixth graders. Physicians, community health centers, and other agencies administered more than **215,891** additional doses, mainly for children receiving Medicaid or without health insurance. Data recently released by the Centers for Disease Control and Prevention (CDC) show that **77.5 percent** of Kentucky's two-year-olds have received the required immunizations.

The Tuberculosis (TB) Control Program works to reduce the number of infections, cases, and deaths due to TB. In Kentucky **138** cases of TB were reported during CY 2003. The reported incidence of tuberculosis in Kentucky reached a target goal of **3.4 cases per 100,000** population. This continues to be well below the national case rate that was 5.2 per 100,000. The TB Control Program provides resources in support of tuberculosis efforts of local health departments, as well as consultation to health department and other health care providers. Local health departments are the primary source of care for 70 percent of tuberculosis patients.

The Sexually Transmitted Disease (STD) Program seeks to reduce the occurrence and prevent the transmission and debilitating complications of STDs. Priority is given to persons diagnosed or exposed to early syphilis or to Human Immunodeficiency Virus (HIV). The Program also places a high priority on the prevention of congenital syphilis infection in neonates. In conjunction with local health departments and selected other sites, the STD Program conducts a statewide screening program for gonorrhea and chlamydia infection.

Among **75,676** patients screened, **1589** gonorrhea and **3260** chlamydia infections were found. Total cases reported in CY 2003 were: **3578** gonorrhea, **7891** chlamydia, **160** syphilis, and **40** other STD infections.

Health Policy Development Branch

The Health Policy Development Branch provides public and private sectors with timely and accurate information on the cost, quality, and outcomes of health services, conducts research and analysis on health policy, and supports development of

information in support of policy development. The Health Policy Development Branch was responsible for the following activities:

Collection and distribution of data under KRS 216.2925-2929 which requires the collection of health cost data from providers, hospitals, and health facilities and a permanent advisory committee to define quality outcomes measurements and advise the Cabinet for Health Services on data interpretation. The Branch has processed 1,308,791 records on health care utilization, both inpatient and outpatient, during the current year. Private requestors are charged a fee of \$1,500 for a calendar year's data file, while state and local government agencies are provided data (and in some cases, analyses of hospitalization data) on a by-request basis. During 2002-2003, twelve data sets were provided to six private requestors and the Healthcare Cost and Utilization Project, returning a total of \$18,000 in fees for the public use datasets.

Hospitalization data were also extracted and provided to four Kentucky agencies (Kentucky Injury Prevention Research Center, Jefferson County Health Department, the Chronic Disease Branch of the Kentucky Department for Public Health, and the Kentucky Center for Rural Health), the state of West Virginia, and a physician researcher in pediatric cardiology at the University of Washington.

The following reports are a representative sampling of reports that have been developed and disseminated during 2002-2003. These reports have been created for use by the public, researchers, and policy-makers for their use in understanding Kentucky's inpatient resources: This list of reports is indicative of the type of analysis that has been done with the data available.

1. Inpatient Hospitalization Summary by Quarter, 2001 (M. Smith-Mello, LTPRC)
2. Leading Twenty-five DRGs, 2002 Hospital Utilization Report, Tables 19.1, 19.2
3. Inpatient Hospitalizations by PDG and Age, 2001 (M. Singleton, KIPRC)
4. Inpatient Hospitalizations by PDG and Age, 2002 (M. Singleton, KIPRC)
5. Kentucky Access Top 50 Diagnoses, 2002
6. Kentucky Access Top 50 Diagnoses by Payer, 2002
7. Kentucky Inpatient Asthma Hospitalizations by County and Age, 2000-2001 (L. Lyle, Chronic Disease)
8. CABGs and PTCAs, Kentucky Hospitals, 2000-2001
9. Diabetes Diagnoses, Kentucky Hospital Inpatients, 2000-2001 (R. Alsup, Chronic Disease)

10. Diabetes Diagnoses and Lower Extremity Amputations, Kentucky Hospital Inpatients, 2000-2001(R. Alsup, Chronic Disease)
11. DKA Diagnoses, Kentucky Hospital Inpatients, 2000-2001(R. Alsup, Chronic Disease)
12. Leading Thirty DRGs by Age, Fayette County Residents, 2002 (Fayette Co. HD)
13. Psychoses Hospitalizations by Patient ADD, Payer, and Gender, 2001
14. Wildland Fires/Respiratory Hospitalizations, 1999-2002 (Governor's Summit Presentation, October, 2002)

HPDB surveys, collects data, and publishes reports relating to home health, long-term care, hospice, ambulatory surgery, and acute care, rehabilitation, and psychiatric hospitals. For the second year in a row, there was 100% compliance from all facilities surveyed. The Annual Facility Utilization Reports were published in the summer and fall of 2003 with more than 57 copies distributed. Due to the prohibitive cost of printing, the annual reports were made available through the Department for Public Health Data Warehouse rather than a hard copy being mailed to each facility/agency.

The Branch was responsible for editing and publishing *Healthy Kentuckians 2010*, a document that provides an updated agenda for Kentucky's health. Approximately 100 copies of this document have been distributed this year. Kentucky is one of only five states to develop a state document as a companion to the national *Healthy People 2010*. This report was also made available to the public through the Department for Public Health Data Warehouse. The Branch continues to be the point of contact for questions and requests relating to the *Healthy Kentuckians 2010* document.

The Branch also provided support for the Division's emergency preparedness activities and worked closely with the Public Health Preparedness Branch. HPDB functions as grants administrator for the CDC Public Health Preparedness (\$13.9 M) and HRSA Hospital Bioterrorism Preparedness Program grants (\$7 M). Staff collaborated with local health department, emergency management, hospitals, and other organizations to increase the preparedness of the Commonwealth in their planning activities. Staff provided support to regional hospital preparedness planning, coordinated mental health agency involvement in local planning, and served as HRSA Hospital Bioterrorism coordinator.

HPDB staffs the Health Resources and Services Administration (HRSA) and CDC Statewide Bioterrorism Advisory Committee. Four Statewide Bioterrorism Advisory Committee meetings were held in 2002 and 2003, as well as three HRSA meetings in 2003. The CDC conducted a site visit in March, 2003.

HIV/AIDS Branch

The **HIV/AIDS Branch** protects, promotes, and monitors the health of the public by prevention of HIV transmission and its associated morbidity and mortality. Staff in the four sections of the HIV/AIDS Branch carry out this mission.

HIV Counseling and Testing offers anonymous and confidential HIV antibody testing, free of charge, in all 120 Kentucky counties through local health departments. Some counties also provide these services to inmates of local jails or prisons. Currently, there are **177** state-sponsored HIV counseling and testing sites in Kentucky. In fiscal year 2003, of **18,203** persons served at these sites, **97** were found to be HIV infected. Also, **2,509** Ora-Sure Tests were performed in fiscal year 2003.

HIV/AIDS Surveillance is charged with recording and reporting HIV and AIDS cases diagnosed in Kentucky. The staff compiles and distributes statistical reports to more than **850** recipients. The surveillance component completed **244** HIV case reports (a decrease of 232 from the previous year) and **204** AIDS case reports (a decrease of 57 from the same period last year).

HIV/AIDS Prevention consists of three programs: Professional Education, HIV Prevention Community Planning, and Targeted HIV Prevention. The Professional Education Program reviews HIV continuing education courses and school curricula for the education criteria mandated in Kentucky. This mandated continuing education requirement impacts **104,857** health care professionals and social workers licensed by the state. During fiscal year 2003, staff reviewed **185** courses and school curricula for education about HIV and sent lists of approved HIV/AIDS courses to **921** individuals. Amendments to KRS 214.610 and KRS 214.615 in 2001, which established a ten-year continuing education cycle for the mandated HIV/AIDS course, have resulted in a temporary drop in courses and school curricula submitted for review and in requests for the course lists, for curriculum surveys to be sent to schools and for the course application. These numbers are expected to increase as we draw closer to the end of the first ten-year cycle. With the advent of the Department for Public Health Website, the Professional Education Program posted the lists of approved HIV/AIDS courses and course applications to that website in July of 2000. This action has substantially reduced the number of lists and applications that are mailed, thereby reducing expenditures for printing costs, envelopes, postage, and staff time spent on this aspect of the program. During this past fiscal year, website referrals were given to **516** individuals, and the course lists and the application document received **129** "hits." Due to the amendments to KRS 214.610 and KRS 214.615 in 2001 there was also a temporary drop in website referrals and "hits." (Statistical information for the number of website "hits" was not available from February, 2002 thru May, 2003. Therefore, the data for July, 2002 – May, 2003 is not available.)

HIV Prevention Community Planning has a statewide Community Planning Group (CPG). The CPG conducts needs assessments of existing HIV prevention efforts and resources and recommends intervention strategies to reduce the risk of HIV transmission for at-risk populations.

The HIV Prevention Program reached **61,975** persons in fiscal year 2003 through the above activities. Five health departments in higher prevalence areas of the state work with the CPG to target high-risk individuals. This program reached **13,239** persons.

HIV/AIDS Services offers five programs:

The Kentucky HIV Care Coordinator Program employs case managers, based in six regions of the state, to link HIV-positive clients with health and human services for which they are eligible. This program served **1,885** HIV-infected clients during fiscal year 2003.

The Kentucky AIDS Drug Assistance Program (KADAP) assists low-income HIV-positive individuals with purchasing up to **48** HIV-related medications. There were **681** low-income individuals who received assistance in Grant Year 2002, a decrease of **27** from the past year.

The Kentucky HIV Health Insurance Assistance Program helped **218** persons at risk of losing existing insurance coverage with their premium payments. The Outpatient Health Care and Support Services Program assisted **1,885** clients with physical and mental services, substance abuse treatment, benefits advocacy, and nutrition.

Public Health Preparedness Branch

In 2003, the Kentucky Department for Public Health received \$13.9M in grant funding from the Centers for Disease Control and Prevention (CDC) and \$7M in grant funding from the Department for Health and Human Services, Health Resources and Services Administration (HRSA) for public health emergency preparedness and planning. These funds were utilized to prepare the Commonwealth to respond to a biological, chemical or radiological emergency. The Public Health Preparedness branch in the Division of Epidemiology and Health Planning is responsible for oversight of these grants as well as other preparedness activities. All Divisions within the Department, as well as others outside the Department, are working together to accomplish the goal of protecting the Commonwealth in the event of a bioterrorism event.

The Branch maintained and updated the Department's Emergency Response Plan and worked with local health departments on maintaining and updating all 56 local health emergency response plans. The Branch also trained and reviewed bioterrorism and other public health emergency plans developed by all 56 local health departments. This includes all strategic national stockpile plans and local pre-event and post event

smallpox vaccination plans. The Branch also was responsible for coordinating activities between the federal government and the local communities.

In 2003, Branch staff:

- Planned and coordinated the hiring of planners at the local level, trained, and oriented them.
- Attended national conferences and meetings such as Metropolitan Medical Response Systems conferences, bioterrorism meetings sponsored by the National Governors Association, and the CDC/Dept. of Energy/Dept. of Homeland Security conference.
- Made presentations on Weapons of Mass Destruction and the Strategic National Stockpile to medical staff, nurses, and local public health staff, law enforcement, emergency management, and EMS professionals and provided training monthly for participants at the CDC sponsored "Community Health Response Training " course.
- Received training from the Office of Domestic Preparedness Treat Assessment; CDC's Community Health Response training; National Strategic Stockpile training; and Forensic Epidemiology training.
- Participated in exercises on various public health threats across the state with local health departments, hospitals, Metropolitan Medical Response Systems, Kentucky Department of Agriculture, as well as others.
- Participated in "after action report" regarding mass casualty event in Corbin [plant fire], which required multi-agency cooperation similar to a WMD event.

Surveillance & Health Data Branch

The **Surveillance & Health Data Branch**, designated as the state's Center for Health Statistics, maintains a public health database, which collects and distributes information that supports health assessment and planning. The Branch compiles data at the county level on health status indicators, demographic trends, and related socioeconomic factors. The Branch publishes two major reports each year, the *Kentucky Annual Vital Statistics Report* and *Kentucky County Health Profiles*. Staff also provided responses to **475** requests for vital statistics data.

The Branch also maintains an automated register of all legally mandated disease reports from health care providers, facilities, laboratories, and local health departments. The data are used to provide a sound epidemiological database for Departmental

decision-making in disease prevention and control and health promotion. The Branch publishes disease data, along with other timely health care information in monthly issues of *Epidemiologic Notes and Reports* and distributes them to more than **8,400** health care providers in Kentucky. The Branch conducts epidemiological studies and provides technical consultations to private physicians, local health departments, and many other individuals and organizations. In fiscal year **2002**, the Branch reviewed and confirmed **5,193** reportable diseases (**exclusive of STDs**), received **8,929** reports of diseases not mandated as reportable, assisted in the investigation of **14** outbreaks of diseases, and provided **3,735** consultations relating to diseases.

The Branch also conducts the Behavioral Risk Factor Surveillance System, which is an ongoing statewide telephone survey of adults to learn about lifestyles and health risk factors. More than **7,500** telephone interviews of adult Kentuckians 18 years of age or older were conducted last fiscal year. The results of the survey were analyzed and reported to CDC for national comparisons.

Vital Statistics Branch

The **Vital Statistics Branch** collects, preserves, and protects certificates for births, deaths, marriages, divorces, and induced terminations of pregnancies, which occur in Kentucky and issues certified copies as requested. The Branch records and provides for people born in Kentucky a means of establishing their legal identity, age, parentage, and nationality. It also makes available a legal documents attesting to the date, place, and cause of every death occurring in the Commonwealth.

For fiscal year 2003 the following vital statistics were registered:

- **51,228** births and **358** stillbirths
- **40,480** deaths
- **37,508** marriages and
- **21,276** divorces and annulments

There were also **22,424** amended birth records and **244** amended death records.

There were **214,144** certified copies of birth certificates issued for fiscal year 2003. The Branch also issued **195,687** certified copies of deaths, **3,899** certified copies of marriages, and **1,355** certified copies of divorces. For the fiscal year 2003, **\$3,437,658** in fees were collected.

Division of Laboratory Services

The **Division of Laboratory Services** makes reliable laboratory facilities available for the protection of health in the Commonwealth. The Division achieves this through the following:

- Providing examinations of clinical and environmental specimens to support other state and local health department programs, and reference testing for hospitals and practicing physicians
- Increasing the effectiveness of laboratory science in improving health status by providing consultation with state and district health programs, physicians, hospitals, medical examiners, coroners, and industrial hygienists
- Protecting the health, safety, and welfare of people from the hazards of improper performance by health laboratories

Activities conducted in support of the Local Public Health Laboratories include the following:

- Coordinated compliance with the Clinical Laboratory Improvement Amendments (CLIA) of 1988 for more than **326** local health department sites through two multiple-site certificates. Division of Laboratory Services staff serves as laboratory director and technical consultants so that local health departments will meet CLIA requirements
- Consultations and training to verify local health department CLIA compliance
- **50** on-site consultations to local health departments participating on the multiple site certificate for CLIA
- More than **400** phone or electronic consultations concerning laboratory testing performed in the local health departments

Activities conducted in support of the Division include:

- State Laboratory Inspections were passed with no deficiencies.
- More than **50** phone consultations concerning laboratory safety
- **30** training activities and **35** audio-conferences

Chemistry Branch

The Biochemistry Section performs basic clinical chemistry tests, therapeutic drug monitoring, thyroid testing on adults and all the newborn screening testing for the state, as well as well child sickle cell testing. The Section represents the largest volume lab in the Division. The Section performed a total of **477,264** tests in fiscal 2002:

- **101,954** tests on **32,901** adults in the clinical area and
- **374,592** tests on **72,959** specimens in the newborn screening area

Of these screening tests, the Section referred **13** infants for PKU; referred **69** infants for galactosemia including **8** positives; **22** infants for hemoglobin abnormalities; and referred **401** infants for further evaluation for thyroid gland function. The Section continues to research new methodologies for the NBS area of testing.

The Instrumentation Section provides chemical and physical analyses to the Labor Cabinet's OSHA program, the Environmental Management, Food Safety and Milk Safety Branches of the DPH, the Dental Health Program, and the local health departments. In FY **2003**, the Section processed **5,006** samples for these state agencies and maintained enrollment in **four** proficiency testing programs covering **seven** types of chemical and physical analytes.

Microbiology Branch

The Bacteriology and Parasitology Section is composed of three testing programs. The Sanitary Bacteriology Laboratory tested **1,843** drinking water and recreational water samples, **1,166** milk and dairy samples, and **89** food samples. Botulism toxin testing was performed on **four** samples of which **one** positive case was found. The Milk Laboratory Evaluation Officer provided on-site inspections, training, consultation, and split-sample proficiency testing for the dairies and their analysts. Each dairy is inspected every two years for certification, all new analysts are certified, and analysts are certified when new methods are instituted. The Laboratory is CDC certified to perform Pulsed Field Gel Electrophoresis (PFGE) testing for *Salmonella* and *Escherichia coli* O157:H7. The Bacteriology and Parasitology Laboratory performed **699** tests for intestinal parasites, **567** for enteric pathogens, and **152** for unusual miscellaneous bacteria identification. Over **368** *Salmonella* serotypes were identified along with **59** *Shigella sonnei*, and **37** *Escherichia coli* O157:H7 enteric pathogens. Nucleic acid probe testing is performed to determine if patients from STD, Family Planning, and Prenatal Clinics are infected with *Chlamydia trachomatis* and/or *Neisseria gonorrhoeae*. The performance of **67,191** tests resulted in **2944** positives for Chlamydia and **1036** positives for gonorrhoeae. On-site visits were made to **two** county health departments as a quality assurance measure for the Infertility Project. The Mycobacteriology Laboratory uses a liquid rapid method for culturing **6,399** specimens for Mycobacteria. Testing of **1,307** isolates is identified by use of DNA probes and/or High Performance Liquid Chromatography (HPLC). As a member of the Laboratory Response Network this laboratory continues to be involved in Bioterrorism Laboratory Preparedness by revising policies, procedures, and quality assurance practices. Approximately seventy-five hospitals and reference laboratories have been contacted to participate as a Kentucky sentinel laboratory site.

Sentinel sites must be proficient to rule in or rule out bioterrorism agents and certified to package and ship infectious agents to the appropriate testing site. **Eight** Level A wet workshops and **six** Packaging and Shipping workshops were conducted for sentinel lab preparedness. Anthrax testing was performed on **48** environmental specimens. Verification and validation studies for *Bacillus anthracis*, *Yersinia pestis*, and *Fransicella tularensis* rapid DFA methods have been finalized. Speciation testing of the Brucella species is now available. Staff members participated in CDC bioterrorism proficiency testing for *Yersinia pestis* and *Fransicella tularensis*. A partnership has been developed with the 41st CST Weapons of Mass Destruction unit to provide ongoing training and collaboration. The BSL 3 laboratories are currently under renovation. Initiated the application process for Select Agent certification and inspection. Laboratory personnel continue to attend training courses and upgrade laboratory methods for bioterrorism organisms.

The Serology Section performed **23,204** HIV-1, **3828** hepatitis B, **23,214** syphilis, **6108** rubella, and **3545** immuno-hematology testing in support of the Divisions of Epidemiology and Adult and Child Health. The Section also performs **380** HIV-1 testing in conjunction with the Justice Cabinet for persons convicted of sexual offenses and prostitution.

The Virology/Fluorescent Antibody (V/FA) Section tests clinical specimens for the presence of viruses, identifies viral isolates referred from other labs in the state, and performs serological tests to determine antibody status to various agents. During this fiscal year **4,859** specimens were received in the V/FA Section and **19,091** examinations performed. **1233** animals were tested for Rabies and **22** were found to be positive. This Section is in its **46th** year of association with the World Health Organization, helping to track seasonal outbreaks of influenza and aiding in the determination of vaccine composition for the next year. During the 2002-03 Respiratory Season **376** specimens from **47** counties were tested. Of the **191** respiratory agents recovered **155** were identified as Influenza B, **25** as Influenza A, **seven** as Respiratory Syncytial Virus, **two** as Parainfluenza, and **two** as Adenovirus. In addition, **310** cases of Herpesvirus infection, and **2** Enteroviral agents were isolated and identified. **3087** TB fluorochrome smear slides were read with **349** of these being positive. **433** confirmatory syphilis tests were performed. Procedures for West Nile testing were developed and implemented with **1001** serological tests performed and **129** positives detected. Section staff members participated in **five** proficiency surveys with **13** challenge events. All staff attended HIPAA training and Bloodborne Pathogen training, as well as, **four** web-casts and **seven** teleconferences on various laboratory topics i.e., Bio-terrorism, SARS, Smallpox, and West Nile Virus. **Four** staff members attending workshops on the Packaging & Shipping of Dangerous Goods and received certification to perform this activity.

Technical & Administrative Services Branch

The **Technical & Administrative Services Branch's** two Sections provide essential services to the laboratory and to local health departments. In addition, the Branch Manager prepares and monitors the Division's budget, performs cost accounting, and serves as legislative liaison and the quality assurance coordinator for the Division. The Quality Assurance program has been designated "the best in the state" by CLIA surveyors. Branch staff provided newborn screening including follow-up on over **6,000** abnormal screening results and follow-up with more than **17,000** letters to parents and physicians.

The Administrative Services Section is primarily responsible for data management and reporting of medical laboratory results, data entry of patient demographics, procurement and distribution of equipment and supplies, inventory control, and equipment maintenance and repair. In fulfilling these responsibilities, staff performed data entry on approximately **290,000** specimens. Telephone inquiries are now recovered by the appropriate lab section in order to relieve data entry staff. Over **10,000** telephone inquiries were fielded by Laboratory staff.

The Technical Services Section provides laboratory support services including receipt and distribution of approximately **260,000** medical laboratory specimens. Staff prepared and dispensed approximately **65,000** units of biochemicals and reagents used for laboratory tests, including media for BT, and assembled and shipped approximately **300,000** kits for collecting and mailing laboratory specimens.

Division of Local Health Department Operations

The **Division of Local Health Department Operations** is responsible for the day-to-day operations of the Local Health Departments (LHD). This responsibility includes training and staff development, personnel management, public health nursing, medical records and forms management, reporting of clinical and community-based services, operating the online local health network, policy interpretation, and the Local Board of Health nomination process. The Division is the primary liaison between the Department for Public Health (DPH) and LHD. The Division determines allocations of \$8.6 M to LHD to support local and state health initiatives. In addition, the Division is responsible for coordinating the training and education activities for the Bioterrorism preparedness grant

Training and Staff Development Branch

The **Training and Staff Development Branch** serves as the “knowledge broker” for the department and the local health departments by identifying resources and matching them with training. The mandate for statewide training is provided annually in the form of Public Health Practice Conferences. In FY 2004, four conferences were held with approximately 1000 state, local and agency participants. The Branch works with each Division within DPH to develop and maintain a core curriculum for public health practice.

The Branch coordinates the functions with the DPH Public Health Practice Education Advisory Committee comprised of local and state health department, institutions of higher education, and related health agencies representatives. The committee provided ongoing input into the planning, development and evaluation of DPH training and continuing education offerings. The group served as the Steering Committee for the Kentucky Public Health Leadership Institute, and the Kentucky Board of Nursing Providership.

The Branch processed over 2000 requests for offerings. Agencies providing offerings/trainings include the Governor’s Office of Technology (GOT), Emory University Regional Training Center, Centers for Disease Control and Prevention (CDC), Kentucky School of Public Health, University of Kentucky, Eastern Kentucky University, University of Louisville, and private consultants. The Branch provided continuing education units for five disciplines through 80 courses, with 520 contact hours to more than 4,000 participants during fiscal 2004. Several courses were presented at numerous sites. Other trainings, workshops, and in-service updates for categorical programs are coordinated through the Branch.

Continuing education partnerships with the state universities provide the appropriate assessment, provision and evaluation of ongoing educational needs. This is a united effort for academia and practice to promote competency in public health practitioners.

One hundred fifty public health practitioners have completed the Kentucky Public Health Leadership Institute (KPHLI) conducted collaboratively with DPH, Training and Staff Development Branch and the University of Kentucky School of Public Health. Forty-four new scholars began the one-year institute in April 2004. For the past three years, a group of KPHLI Fellows have distinguished themselves by being selected to present at American Public Health Annual Meeting.

The Branch developed a statewide trans-disciplinary team of sixteen Bioterrorism Training Coordinators to implement the competency-based curriculum using the essential services, core competencies and bioterrorism competency for public health. The team members serve on the Education Advisory Committee and are located in local health departments.

A monthly training calendar of learning opportunities listing upcoming courses, training events, and video/audio holdings was published monthly on the Branch's WEB page. On line registration through the TRAIN, the Department's learning management system, was implemented in March 2004 for courses approved by the Training Branch.

Local Personnel Branch

The **Local Personnel Branch** is responsible for the operation and maintenance of the personnel system for 53 local health departments and their 3,300 employees. The Branch provided support for the five-member Local Health Department Employment Personnel Council and recommended changes in the compensation and classification plan. The Branch helped health departments recruit qualified employees by reviewing applications, processing personnel appointments, salary adjustments, reclassifications, and promotions; and maintaining master personnel records and a register of applicants. The Branch conducted regional training programs for local health department directors, supervisors, and personnel specialists. Subjects include progressive discipline, employee performance evaluations, personnel regulations, sexual harassment, and recruitment of qualified employees. The Branch has begun preliminary steps to begin a comprehensive review of the classification plan for local health department employees. The classification plan will be updated to better reflect current duties and responsibilities of local health department employees.

Public Health Nursing Branch

The **Public Health Nursing Branch** is responsible for promoting public health by facilitating public health nursing through local health departments. Enabling local public health nurses and other multi-disciplinary health team members to be an integral part of mandated Core Public Health Activities is the major role of the Public Health Nursing Branch.

Public health nurses provide leadership and support to empower local health department nurses to provide population-focused community-based services and to achieve public health objectives on an individual community or county basis. Each Public Health Nurse Consultant is a regional nurse consultant to independent and district health departments, serves as liaison to designated Departmental Division(s), and is responsible for specific areas of collaboration and expertise.

During FY 2003, the Public Health Nursing Branch promoted public health at the local level in several ways:

- Provided "Public Health Nursing Practice" on-site reviews of 120 local health departments to assure the safety of the public and quality of health care to Kentucky's citizens, including compliance with Public Health Practice Reference guidelines; with 50 follow-up technical assistance on-site visits.
- Provided phone and/or e-mail contact with all 56 health department agencies, with each Public Health Nurse maintaining contact with her 30 specifically designated counties, to help them move from providing care "in the clinic" to being responsible for the health of the "whole community";
- Provided over 4,000 technical assistance contacts to enable local health department nurses to provide more efficient clinic flow, improved medical record documentation and patient management, and overall health department operation;
- Coordinated the development, updating and distribution the Public Health Practice Reference, which provides guidelines/protocols for delivery of health services and patient care, the 56 LHD at a total of 146 locations; including semi-annual revisions and emergency changes being forwarded by CD's and hard-paper copy with e-mail notification of Public Health Practice Reference changes;
- Made requested changes and distributed the Disaster Response and Recovery Plan as indicated above;
- Assisted in HIPAA compliance policy development, forms and consents development, patient awareness and education, and employee education;
- Mentored the development of HIPAA Checklist including, HIPAA Flow Assessment for LHD employees; Project recognized as worthy of submission to American Public Health Association for National Award;
- Participated in Kentucky Public Health Leadership Institute with Public Health Nurse mentoring the Public Health Nurse Competency Group who won National Award;

- Coordinated with Department for Medicaid Services for Early Periodic Screening, Diagnosis and Treatment (EPSDT) Outreach and Kentucky Children's Health Insurance Program (KCHIP) Outreach; providing seven training sessions available to all **146** local health department service sites to promote EPSDT and KCHIP Outreach and Screenings statewide;
- Collaborating with Passport Managed Care Region's 16 counties in participation presentation for Annual Prevention Workshop; and
- Promoting public health awareness and education through participation in "Empower Black America" Conference and State Fair Department for Public Health Exhibit, including cholesterol and blood glucose screenings and body-fat analysis.

Public Health Support Branch

The **Public Health Support Branch** has strengthened its ability to help local health departments with proper reporting and record keeping. The Branch's motto "Do it right the first time" has led to improved data collection, fewer billing errors, maximized collections, and improved overall efficiency in health records. Finally, the division has worked with local health departments and the Department for Medicaid Services and the private sector to identify alternative sources of revenue for local health departments.

The Branch strengthens and enhances the operation of local health departments through administrative support systems, such as an automated patient and services reporting system that tracked 4,811,450 services to 782,791 *unduplicated* patients in fiscal 2003. Additionally, the Branch helps in maintaining a statewide on-line computer network with at least one site in each of Kentucky's 120 counties. The Branch operates the local health network's HELP DESK that provides assistance to local health departments on the network, and in troubleshooting computer problems.

The Branch provides technical assistance and consultation to local health departments for the 476 service delivery sites on medical record standards. On-site consultation and record review assure adherence to these standards. Other responsibilities include the following:

- Development and refinement of integrated patient records and generic data collection forms
- Technical assistance to health departments on patient intake, registration, patient flow, and coding of clinical services. In fiscal year 2003, we have also added the responsibility for helping health departments when errors in third party billing arise (Medicaid, Medicare and private insurance). We work with Third Party Payers to resolve issues and help health departments keep their cash flow current.

- Responses to special data requests from health departments and DPH's staff, HELP DESK back-up, and development of departmental publications available to local health departments and the public
- Development of procedures for security access for all system users of the local health network
- Working with DPH programs and the Public Health Nursing Branch to assist with the delivery of health services and patient care, and development and implementation of quality assurance standards and reviews
- Maintaining the Records Retention and Disposal Schedule and providing technical assistance in all areas of records retention and disposal for DPH and local health departments.

Division of Public Health Protection and Safety

The **Division of Public Health Protection and Safety** includes programs related to the enforcement of public health regulations for environmental health and community safety. The Division works closely with local health departments to make sure that Kentuckians are protected from unsafe consumer products, lead hazards, unnecessary radiation exposure, unsanitary milk, adulterated and misbranded food, unsanitary public facilities, and malfunctioning sewage systems. State staff are responsible for radiation health and safety issues involving both the natural environment and organizations using radioactive materials, inspection of x-ray equipment, Grade "A" milk production, public health aspects of chemical weapons storage at the Blue Grass Army Depot, and certification of public swimming pool designs.

Environmental Lead Program

The Environmental Lead Program certifies and monitors individuals who conduct lead-hazard detection or abatement in target housing or child occupied facilities, accredits and monitors the activities of accredited training programs, reviews abatement plans, issues permits, conducts quality assurance inspections, follows up on complaints, conducts environmental educational efforts, and conducts other surveillance activities required to carry out the State compliance program. Approximate numbers of related activities conducted during this period was: **Fifty-two** new individuals and companies were certified. **Twenty-six** individuals renewed their certification. **Eighteen** abatement projects permits were issued; **Eighty-four** compliance and enforcement investigations, inspections and compliant follow-ups were conducted. **Three hundred seventy-five** inspection and assessment reports were reviewed for appropriate information required by regulations. **One** new training provider was accredited by the agency. **Seventeen** courses were monitored. There were responses to approximately **1,165** telephone inquiries related to certification, abatement, and obtaining disclosure pamphlets.

Environmental Management Branch

The **Environmental Management Branch's** mission is to prevent disease and eliminate existing unsanitary conditions and safety hazards in public facilities as well as in an individual's personal environment in the Commonwealth.

The Environmental Management Branch strives for compliance with standards as established by regulation or laws through the surveillance of environmental factors and evaluation of Branch programs and environmental personnel.

Facilities are regulated through annual operating permits and routine inspections to assure that they are in compliance with laws and regulations. Facilities that are regulated by this Branch include hotels/motels, public restrooms, schools, state

confinement facilities, public swimming and bathing facilities, mobile home/recreational vehicle parks, and youth camps. There were **7,229** permitted facilities and **18,978** activities reported for FY 2002-2003.

The Onsite Wastewater Program, which includes onsite wastewater treatment and disposal systems with subsurface discharges (septic systems), septic tank cleaners, certified inspectors of wastewater systems, certified installers of wastewater systems, and private water supplies, is administered through the local health department environmentalists who have attended training and are certified to conduct onsite evaluations to determine whether site and soil conditions are suitable for the installation of onsite wastewater systems. Of the **5,750** installers enrolled, many obtain permits to install systems in Kentucky unless a homeowner wishes to install their own system and obtains a homeowner's permit. There were **15,908** onsite sewage disposal permits issued and **115,734** activities reported. Other reported activities were: nuisance control/complaints **20,459**, vectors, birds, insects, grass/weeds, rodent, and mosquito control **6,936**.

Food Safety Branch

The **Food Safety Branch** prohibits the sale of adulterated, misbranded, or falsely advertised foods and food products and eliminates unsanitary conditions in boarding homes, tattoo, body piercing and ear piercing studios. The Branch provides planning, monitoring, training, and evaluation for health department food, boarding home, tattoo, body piercing and ear piercing studio surveillance programs. Investigation samples are collected from food service establishments, retail food stores, vending machine companies, food manufacturing and storage plants, and from the state's raw agricultural producers for pesticide residues. Branch staff inspects Food Processing and Food Storage facilities. The Branch maintains standards of identity for various standardized foods and sets acceptable compliance levels for all food establishments in the state.

The Branch:

- Issued **21,723** retail food, tattoo, and boarding home permits
- Issued **1,395** permits to food processors and food storage warehouses
- Provided **77,862** surveillance activities
- Destroyed **506,800** pounds of adulterated food
- Collected **8,392** samples
- Collected **50** raw agricultural samples for pesticide analysis
- Reviewed **502** food/drug or cosmetic product labels for compliance
- Trained **23** new health department environmentalists
- Standardized **16** local health department retail food specialists
- Held **71** enforcement hearings or conferences for establishments in non-compliance
- Investigated **39** consumer complaints forwarded from the FDA

Announced and monitored **40** food recalls

Ten staff received specialized food safety training from FDA.

Developed and successfully produced a "Retail Food Seminar"; Food Safety Accreditation Student Training (FSAST) Video for high school students; In partnership with Partners for Family Farms, the Heifer Project International & Kentucky State University, provided inspections and regulatory oversight for Mobile Poultry and Shrimp Processing unit

The Branch responded, in writing, to 133 requests from perspective food and cosmetic manufacturer's for general informational packets tailored to their specific needs.

The Branch routinely receives consumer complaints or inquiries relating to foods, drugs, and cosmetics that have been consumed or purchased. Consumer complaints range from concern over retail food stores, food service establishments, salvage food establishments, schools, nursing homes, hospitals, boarding homes, tattoo, body piercing and ear piercing studios. Typically, the Branch receives approximately **10** complaints or inquiries per month.

The Food Safety Branch routinely receives food-drug-cosmetic recall information. If the recalled product was manufactured or distributed in Kentucky, a recall alert is sent to all local health departments (LHDs).

The Branch routinely utilizes a rapid notification system to immediately notify LHDs of food safety concerns using specialized email distribution systems.

Milk Safety Branch

The Milk Safety Branch prevents adulteration, misbranding, and false advertising of milk and milk products and protects the public from disease transmission through milk products. The Branch oversees inspections of dairy farms, dairy plants, and dairy processors. It is also concerned with the development of product standards of identity and legal labeling of all dairy products mandated by the Food and Drug Administration.

The Milk Safety Program conducted **8,069** inspections of **1,932** dairies, processing plants, receiving/transfer stations, samplers, haulers, trucks, and distributors. There were **21,503** samples collected, **2,436** notices of intent to suspend, and **451** permits suspended. A total of **25** hearings (**34** informal conferences, **2** formal) were conducted, **69** plans reviewed, **33** surveys/check ratings, and **12** USDA survey inspections.

Radiation Health and Toxic Agents Branch

The Radiation Health and Toxic Agents Branch ensures the beneficial use of radiation, protects the public from unnecessary exposure to radiation, and protects citizens in the

nine county areas surrounding the Bluegrass Army Depot from the impacts of chemical warfare agents.

The Radiation Health Program is responsible for licensure, registration, certification of all uses of radiation, and surveillance of radiation facilities to evaluate impacts of radiation on worker and public health. The Program conducts inspections and environmental surveillance, manages compliance activities, and is responsible for statewide emergency response to radiological emergencies/incidents. Transportation of radioactive material through the Commonwealth is another significant action undertaken by the Radiation Health and Toxic Agents Branch. The transportation activities of the Radiation Health and Toxic Agents Branch includes: (1) addressing shipments of "Safeguard" material under 10 CFR Part 73; (2) serving as a member of the Southern States Energy Board's two transportation committees; (3) developing and conducting radiation training for first responders; and (4) assessing and evaluating all shipments of radioactive material and waste through the Commonwealth. The Radiation Health Program undertakes activities related to microwave ovens and video display terminals, and collects information on non-ionizing radiation, such as laser and high-tension electrical lines. The U.S. Department of Energy provides on-going funding to assist in the evaluation of the impact of ionizing radiation on public health as related to the Paducah Gaseous Diffusion Plant, which is a uranium enrichment facility in western Kentucky.

The Radioactive Materials Section inspects and licenses **436** licenses issued to users of radioactive materials in the fields of medicine, industry, research, and academia. In addition, the Section has issued **13** *in vitro/in vivo* general licenses and **186** other general licenses. The Section also assists when radioactive materials and wastes are being transported and also assists in responding to radiological incidents and emergencies.

The Radiation Producing Machine Section inspects and registers **3,567** facilities with **8,294** x-ray tubes that use radiation-producing machines. The Section also issues certificates and inspects **5,779** operators of sources of radiation to ensure compliance. The Section conducted the review of **122** shielding plans for radiation producing machine facilities. The Section annually inspects schools of radiologic technology, provides home study course material to **164** qualified individuals in 2000, and coordinates continuing education credit hours as a prerequisite to re-certification. The Section inspects **162** mammography facilities to assure they meet the requirements of the Mammography Quality Standards Act of 1992.

The Radiation/Environmental Monitoring Section was placed under the direct supervision of the Radiation Health Program in 2000. The Section collects and analyzes samples from areas on-site and surrounding the Maxey Flats Disposal Site and the Paducah Gaseous Diffusion Plant. In FY01 the Section collected **1,397** samples from the Maxey Flats Disposal Site and conducted **5,427** analyses on these samples. The

Section collected **2,890** samples at the Paducah Gaseous Diffusion Plant and conducted **7,226** analyses on those samples. The Section also conducted **17,226** quality control analyses. The Section also assisted in the analysis of Department of Energy data in an effort to determine the impact of past releases from the Paducah Gaseous Diffusion Plant on public health.

The Toxic Agents Program is responsible for ensuring health and medical preparedness of the nine counties surrounding the Bluegrass Army Depot in Richmond. The Program ensures that each of the nine counties has emergency plans for medical preparedness. The Program provides training of medical and emergency medical services personnel in the counties surrounding the Depot, ensuring that the counties have antidotal drugs, supplies, and equipment necessary to address a chemical warfare agent release.

Division of Resource Management

Division Mission Statement: To provide the Governor, the Cabinet for Health Services, and the Commonwealth objective research, analysis, advice, and management assistance on policy, budget, financial, contract, procurement, and economic issues to ensure the fiscal integrity and continuity of state government regarding the Department for Public Health and the 56 local health departments.

The **Division of Resource Management** provides all resource support to the Department for Public Health. This includes the **393** Cabinet-level personnel and nearly **4,000** personnel represented by local health departments. The Division provides all budgets and accounting support, payments, grant allocation and payments, permits and fee collection, procurement and contracting support. The Division develops and oversees the DPH budget and local health departments' fiscal planning and their administrative and management practices. It provides fiscal support to all **120** counties of the Commonwealth. The Division works in concert with the other Department's Divisions to plan, program, execute, manage and report the financial activities of the Department and local health departments. The Division has orchestrated a statewide Public Health initiative to ensure compliance with the federal Health Insurance Portability and Accountability Act (HIPAA). As lead agency, the Division is responsible for planning and implementation of policy, procedural and technical changes to Department for Public Health and local health department operations as they relate to the privacy and confidentiality of patient identifiable information.

Financial Management Branch

The **Financial Management Branch** oversees all State Budget functions and the local fiscal management of local health departments.

State Budget Staff

Staff provide financial oversight of the annual Department budget of approximately \$347 million. The State Budget Staff are responsible for preparing the biennial budget for the Department and spending plans approved by the Governor; preparing all budget modifications and realignments for the Department and to the Governor's Office of Policy and Management (GOPM); reviewing and analyzing revenue and expenditure data as it relates to the Departmental budget in order to provide management with information to make policy and budget adjustments; preparing federal grant reports; and reviewing and providing funding strips for each contract in the Department. Budget Staff also provide revenue account codes for refund checks received from vendors; approve inter-account documents; schedule and review encumbrance reports monthly; and prepare journal vouchers as needed. The State Budget Staff also approve and process all electronic payments and purchase requests through the state Management

Administrative and Reporting System (MARS) and staff serve as MARS liaisons for the Department assisting in user setup, information updates; troubleshooting and training. In addition, the State Budget Staff make budget presentations and advise and provide budget information/data to senior and executive staff at the Federal Government, Cabinet, Governor's Office of Policy and Management (GOPM), and the Legislative Research Commission (LRC).

Local Fiscal Management Section

The **Local Fiscal Management Section** provides technical and consultative assistance to **56** local health departments regarding financial statements, internal controls, minimum local support, visits, training provided and implementation of regulations 902 KAR 8:170 and 902 KAR 8:165 to improve operational and accountability, and advise on any health department issues. This Section reviews and approves the financial portion of the health departments' plans and budgets; reconciles bank statements for health departments under financial review; and coordinates audit reviews conducted by the Office of Inspector General. Staff engage in the following activities:

- Ensuring that the CH-61 Fiscal Court Tax Rate and CH-62 Ballot Tax Rates are set by each county;
- Preparing the local health department Pay Period Schedule and Full-time equivalents by month for each fiscal year;
- Maintaining an up-to-date listing of financial vendors for each health department;
- Assigning costs centers to the health departments and assigning Function Codes;
- Maintaining a listing of each local health department's special projects

This Section also prepares projections of revenue and expenditures for all local health departments on a quarterly basis or monthly if needed; prepares annual closeout reports; and provides on-site technical assistance to health departments. The Reimbursement Section prepares the annual Medicare and Medicaid Home Health Cost Reports and Home and Community-Based Waiver Cost Reports (HCB) for local health departments. Staff analyze and prepare quarterly home health cost waiver and cost reports; prepares quarterly home health administrative charges; and maintains depreciation schedules for the HCB program. This Section processes weekly Medicaid Preventative in the amount of \$18.6M to LHDs and HANDS remittance advices of \$11.8M; and prepares the cost center spread for posting of checks to local health departments. Staff are also responsible for the Medicare Resource Based Relative Values (MRBRV) for the Patient Services and Reporting System (PSRS); and provide training on billing and coding in these areas to health departments.

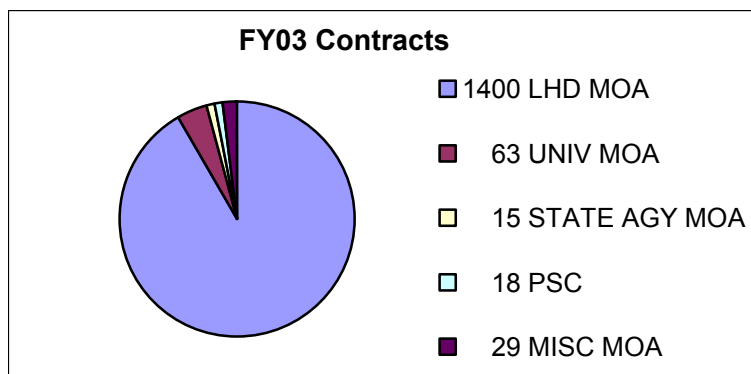
Procurement Branch

The Procurement Branch is responsible for funding 56 local health departments throughout the Commonwealth and ensuring that state and federal funds are allocated in accordance with the DPH's administrative policy and federal guidelines. The Branch consists of two sections, the Grants Management Section and the Contract/Purchasing Section.

The Grants Management Section consolidates the grant allocation and payment functions for the Department. The Section was responsible for \$132 million in grants to local health departments during FY03. The Section consults with program staff to prepare allocations for local health departments to process annual plans and budgets.

During FY03, this Section processed 417 grants that generated 5,306 transactions. In addition, the Section processed 919 payments against those grants that generated 13,587 payment transactions.

The Contract/Purchase Section consolidates the purchasing and contract management functions. This Section plans and directs all Personal Service Contracts (PSC) and Memorandums of Agreement (MOA.) The Department for Public Health issued 1525 PSC's, MOA's and MOD's totaling \$35,806,000 in FY03. The chart below shows the breakdown between Local Health Department MOA's, University MOA's, State Agency MOA's, Miscellaneous MOA's and Personal Service Contracts.



The Procurement Branch provides monthly Grants/Payments Reports, closeout reports on contracts, and provides technical support to local health departments on allocations, payments, and contracts.

Approximately 650 sub-contracts negotiated at the Local Health Department level are processed for review and approval through the Procurement Branch. In addition, the Branch coordinates the Physician Liability Insurance Program for the Department for Public Health.

Other functions performed by the Branch include:

- Equal Employment Opportunity (EEO)
- Americans with Disabilities Act (ADA)
- Compliance for the Division for Resource Management regarding Title VI requirements.

BIRTH AND DEATH STATISTICS IN KENTUCKY

Table I. Resident Live Births by Age of Mother - 2003

Age of Mother	Number of Live Births	% of Live Births	Birth Rate per 1,000 Female Population*
Less than 15 Years	111	0.2	0.8
15 to 17 Years	2,006	3.6	24.5
18 to 19 Years	4,717	8.6	73.2
20 to 24 Years	17,046	30.9	123.7
25 to 29 Years	15,287	27.8	116.7
30 to 34 Years	10,694	19.4	73.5
35 to 39 Years	4,329	7.9	28.0
40 to 44 Years	830	1.5	5.0
45 Years and Older	42	0.1	0.3
Unknown	24	0.0	0.0
Total	55,086	100.0	13.5

***Less than 15 per 1,000 female pop. ages 10-14; 45 & older per 1,000 female pop. ages 45-49; all other ages per 1,000 female pop. in specified age group. Total (crude birth rate) is per 1,000 total population.**

Table II. Resident Deaths by Cause of Death - 2003

Cause of Death	Number of Deaths	% of Total Deaths	Age-adjusted Death Rate*
Diseases of Heart	10,928	27.6	272.9
Malignant Neoplasms	9,141	23.1	221.7
Cerebrovascular Diseases	2,349	5.9	59.6
Chronic Lower Respiratory Diseases	2,288	5.8	56.7
Unintentional Injuries	2,122	5.4	51.9
Diabetes Mellitus	1,237	3.1	30.6
Alzheimer's Disease	1,036	2.6	26.9
Influenza & Pneumonia	975	2.5	24.8
Nephritis, Nephrotic Syndrome & Nephrosis	814	2.1	20.4
Septicemia	543	1.4	13.5
All Other	8,208	20.7	142.7
Total	39,641	100.0	983.5

* Age-adjusted death rate per 100,000 population; adjusted to the year 2000 U.S. standard population.

Source: 2003 Vital Statistics Birth and Death Files

Data are preliminary.

HEALTH DEPARTMENT SERVICES

Mandated Services Required of all Public Health Departments	
Seven Core Services Required by Statute or Regulation	Preventive Services for Specific Populations from Appropriated Funds
Enforcement of Public Health Regulations Surveillance of Public Health Communicable Disease Control Public Health Education Public Health Policy Families and Children Risk Reduction Disaster Preparedness	Family Planning Prenatal Care Well Child Care Women, Infants, and Children Adult Preventive Services Chronic Disease Monitoring and Support

The services listed above are required for all health departments. The authority for core activities exists in the Commonwealth of Kentucky's statutes or regulations. The authority for preventive services is found in state budget language and in grants and contracts with agencies of the United States Public Health Service. These preventive patient services were added as state and federal governments appropriated the funds.

Local Option Services Provided after Mandated Services are Assured

Other Population-Based Services
(Negotiated Services)

Other Services for Individuals
(Negotiated Services)

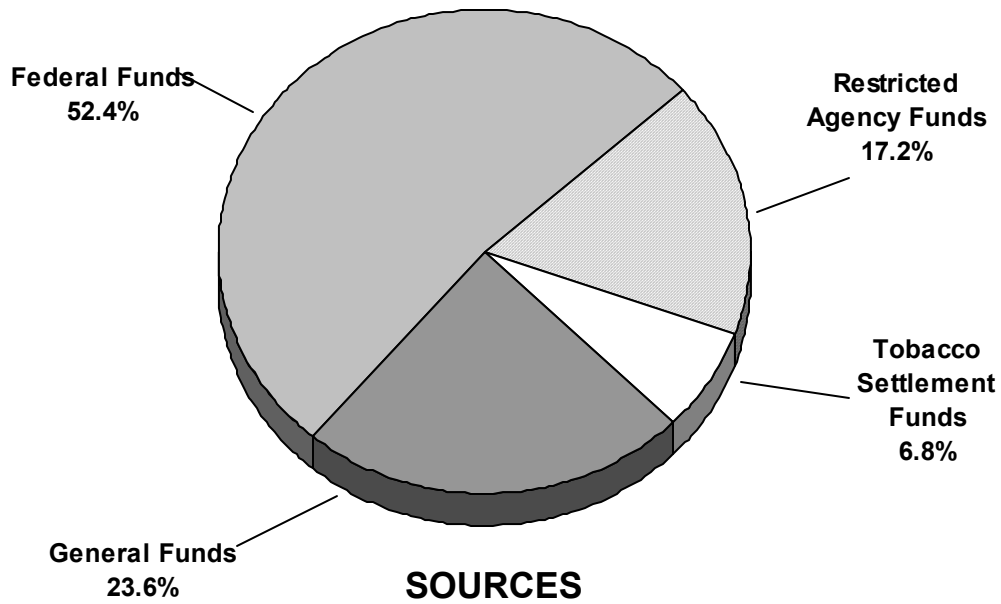
Local health departments at their discretion offer **Local Option Services**. Statute or regulation permits but does not mandate these services. Health departments participating in these activities are expected to be able to compete in the medical marketplace without requiring support from state-appropriated funds. If a community elects to subsidize these services after mandated services have been adequately funded, that is the community's prerogative.

ACTUAL SOURCES AND EXPENDITURES OF FUNDS BY DIVISION

FISCAL YEAR 2003

Division	Division Totals	<u>SOURCES OF FUNDS</u>			
		General Funds	Restricted Agency Fund	Federal Funds	Tobacco Funds
Adult & Child Health	\$ 150,154,062	\$ 22,454,800	\$ 12,608,176	\$ 101,072,317	\$ 14,018,769
General Health Support (includes Resource Management, Local Health Dept. Operations, & Commissioner's Office)	\$ 38,823,129	\$ 17,624,198	\$ 19,866,088	\$ 1,332,843	\$ -
Epidemiology & Health Planning	\$ 31,685,003	\$ 7,673,002	\$ 2,293,346	\$ 19,708,382	\$ 2,010,273
Laboratory Services	\$ 4,791,371	\$ 4,196,600	\$ 594,771	\$ -	\$ -
Public Health Protection & Safety	\$ 9,740,446	\$ 3,634,700	\$ 5,011,050	\$ 1,094,696	\$ -
TOTAL	\$ 235,194,011	\$ 55,583,300	\$ 40,373,431	\$ 123,208,238	\$ 16,029,042
% of Funds/Expend.	100%	23.6%	17.2%	52.4%	6.8%
Division	Division Totals	<u>EXPENDITURES</u>			
		Personnel	Operating Expenses	Grants/Loans/ Benefits	Capital Outlay
Adult & Child Health	\$ 150,154,062	\$ 8,709,283	\$ 1,149,853	\$ 140,294,927	\$ -
General Health Support (includes Resource Management, Local Health Dept. Operations, & Commissioner's Office)	\$ 38,823,129	\$ 6,110,438	\$ 1,047,695	\$ 31,664,996	\$ -
Epidemiology & Health Planning	\$ 31,685,003	\$ 8,370,860	\$ 9,330,409	\$ 13,829,540	\$ 154,194
Laboratory Services	\$ 4,791,371	\$ 2,431,840	\$ 2,352,674	\$ 6,720	\$ 137
Public Health Protection & Safety	\$ 9,740,446	\$ 4,124,369	\$ 1,169,380	\$ 4,421,567	\$ 25,130
TOTAL	\$ 235,194,011	\$ 29,746,790	\$ 15,050,010	\$ 190,217,750	\$ 179,461
% of Funds/Expend.	100%	12.6%	6.4%	80.9%	0.1%

Sources & Expenditures of Funds Fiscal Year 2003



Actual Financial Activity by Division Fiscal Year 2003

